

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Defend Louisiana PAC		FEC IDENTIFICATION NUMBER ▼ C C00616128	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Arsement Media Group		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 02 / 2016	
Mailing Address 104 Live Oak Dr.		Amount 18378.18	
City Lafayette	State LA	Zip Code 70503	Transaction ID : SE.4162
Purpose of Expenditure Radio advertisement	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 02 / 2016	
Name of Federal Candidate FOSTER LONNIE II CAMPBELL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA	
Calendar Year-To-Date Per Election for Office Sought 18378.18		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Arsement Media Group		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 02 / 2016	
Mailing Address 104 Live Oak Dr.		Amount 34621.82	
City Lafayette	State LA	Zip Code 70503	Transaction ID : SE.4163
Purpose of Expenditure Radio advertisement	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 02 / 2016	
Name of Federal Candidate CATHRYN CAROLINE FAYARD		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA	
Calendar Year-To-Date Per Election for Office Sought 53000.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	53000.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	53000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Taylor Townsend

[Electronically Filed]

Date

MM / DD / YYYY
09 / 07 / 2016

Signature